

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering [] check if the an amendment and name has changed, and indicate change.)

1372072

OMB APPROVAL

OMB Number: 3235-0076

Expires: April 30, 2008

Estimated average burdenhours per response... 16.00

SEC USE ONLY

Prefix Serial

DATE RECEIVED

Filing Under (Check box(es) that apply): Type of Filing: [X] New Filing [] Amendm	[] <u>Rule 504</u> nent	[] <u>Rule 505</u>	[X] <u>Rule 506</u>	[] Section 4(6)	[]ULOE	
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1. Enter the information requested about the	ay Digitalisments					
Name of Issuer ([] check if this is an amen Integrated-ActivHealthCare, LLC	dment and name ha	s changed, and indi	cate change.)	0603885		
Address of Executive Offices (Number c/o Christopher R. Outten, D.C., 3200 Bl	and Street, City, Sta		C 27612	Telephone Number (Inclu 910-452-5555	ding Area Code)	
Address of Principal Business Operations (if different from Executive Offices) Same	(Number and	d Street, City, State,	Zip Code)	Telephone Number (Inclu	ding Area Code)	
Brief Description of Business	a kita kina anga saka hari at teggan pengebanga ta ta ta tibanggan malama kita kanawan sangk	nelitis ikuras san terri samon ni Pausas oras soore ni reki Yeggin engi terusahitti nijeren kerel	Cuts and with the 1 g to the transfer from the court of which are the transfer from the 10-major entransfer from the	ys film och den staden en som en som en som en som en en som e Som en som e	de _{re} di nen befoldige nassbadd Mathinishining varlendt bill, int great volt valendrakti	
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[] corporation	[] limited partr	nership, already form	ned	[X] other (please specify): Limited I		
[] business trust	[] limited partr	nership, to be formed	i	PF	ROCESSED	
Actual or Estimated Date of Incorporation or	Organization:] Actual [] Esti	mated 🗠	UG 7 0 2008 HOMSON	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

CN for Canada; FN for other foreign jurisdiction)

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

[G][A]

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not



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•		vote or dispose, or direct the vo	•	of a class of equit	ty securities of the issuer;
 Each executive offic 	er and director of corp	orate issuers and of corporate ge	eneral and managing partners of	partnership issuer	rs; and
 Each general and m 	anaging partner of pa	rtnership issuers.			
Check Box(es) that Apply:	[] Promoter	[X] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partne
Integrated Healthcare of					
Full Name (Last name first,	if individual)				
3200 Blue Ridge Road, Su	ite 216. Raleigh.	NC 27612			
Business or Residence Add		r and Street, City, State, Zip	Code)		
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ActivHealthCare, Inc.					
Full Name (Last name first,	if individual)				
4566 Lawrenceville Highy	vav Suite 101 Lil	hurn GA 30047			
Business or Residence Add		r and Street, City, State, Zip	Code)		
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[] Executive Officer	[X] Director	[] General and/or Managing Partner
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un Name (Last name mst, i	i ilidividual)				
3200 Blue Ridge Road, Su					
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Business or Residence Addr	ess (Number	r and Street, City, State, Zip (Code)		

Business or Residence Address

Full Name (Last name first, if individual)

Check Box(es) that Apply:

[] Promoter

[] Beneficial Owner

(Number and Street, City, State, Zip Code)

[] Executive Officer

[] Director

[] General and/or

Managing Partner

					B. INFO	RMATION .	ABOUT OF	FERING					
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box i and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
Type of Security Debt Equity [] Common [] Preferred Convertible Securities (including warrants) Partnership Interests Other (Specify) Limited liability company interests Total Answer also in Appendix, Column 3, if filing under ULOE.	Aggregate Offering Price \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Amount Aiready Sold \$ \$ \$ \$ \$ \$_0 \$ 0
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
Accredited Investors Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE.	Number Investors 0 2	Dollar Amount of Purchases
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
Type of offering Rule 505	Type of Security	Dollar Amount Sold \$ \$ \$ \$
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees Engineering Fees Sales Commissions (specify finders' fees separately) Other Expenses (identify) blue sky filing fees	[] [X] [] [] []	\$ 0 \$ 0 \$ 10,000 \$ 0 \$ 0 \$ 0 \$ 350
Total	[X]	\$ 10,350

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

 b. Enter the difference between the aggregate offering price give expenses furnished in response to Part C - Question 4.a. This 	n in response to Part C - Question 1 an difference is the "adiusted gross proce	d total eds to			
the issuer."			\$	00	_
5. Indicate below the amount of the adjusted gross proceeds to t each of the purposes shown. If the amount for any purpose is r the box to the left of the estimate. The total of the payments liste to the issuer set forth in response to Part C - Question 4.b above	ot known, furnish an estimate and che d must equal the adjusted gross procee	eck			
			ments to		
			fficers,	D	
			ectors, & filiates		ents To hers
Salaries and fees		[]\$_		[]\$_	
Purchase of real estate		[]\$		[]\$	
Purchase, rental or leasing and installation of machinery		[]\$		[]\$_	
and equipment					
Construction or leasing of plant buildings and facilities Acquisition of other businesses (including the value of secur		[]⊅	0	[]\$	
be used in exchange for the assets or securities of another iss		[]\$	0	[]\$	0
Repayment of indebtedness	· • ·	[]\$	0	[]\$	0
Working capital		[]\$_	0	[]\$	0
Other (specify):		[]\$	0	[]\$	0
		[]\$	0	[]\$_	0
Column Totals		11\$	0	[]\$_	0
Total Payments Listed (column totals added)			 []\$	0	
			114		
	EDERAL SIGNATURE	Chica and consequences with the service energy	eggg; franklinn w. onsegnyerkeltheindes vach	or programment of the control of the	cological to estimate la Principal constituit de la const
D. F		No. of the homeographic and the visit of the find would be	denocation access as an about 90 of Calabian	Cladad MXXXX Haralys Condition	has hydric nasse 4 i K nij v meralikasi
The issuer has duly caused this notice to be signed by the unders signature constitutes an undertaking by the issuer to furnish to the information furnished by the issuer to any non-accredited investor	U.S. Securities and Exchange Commi	ission, upo <u>02</u> .	n written req		
Issuer (Print or Type)	Signature	Date	AND DESCRIPTION OF THE PARTY AND THE PARTY A	COPIE TO THE COMMISSION OF THE PERSON OF THE	
Integrated-ActivHealthCare, LLC	Owaturk July	A C	7-2	5-06	
Name of Signer (Print or Type)	Title of Signer (Print or Type)		ar yagiy idilabilikan ar xo oo aankilika ilaacaan ii	announged (the CONT or back on a for other tens	title in Europe in the West Profile Control of State of
Christopher R. Outten, D.C.					
em stopher K. Outten, D.C.	Manager	Ministrator de la colonia de l	CONTRACTOR OF THE SECTION OF THE SEC	alananya ga ahkeel ka ka alanan ah ka ka yaka ka as	erranany, camaning territor are a rivary is

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

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E. STATE SIGNATURE		
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1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification	Yes	No
provisions of such rule?	[]	[X]"
See Appendix, Column 5, for state response.		

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature Date
Integrated-ActivHealthCare, LLC	Chrosell (18 7-25-06
Name of Signer (Print or Type)	Title (Print or Type)
Christopher R. Outten, D.C.	Manager

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.